



Examiner: Patricia Bianco

Group Art Unit 3761

Patent Application of

Jeffrey H. BURBANK et al.

Application No.

10/774,127 Feb. 6, 2004

Filed Title of the Invention

HEMODILUTION CAP AND METHODS OF USE IN

BLOOD PROCESSING

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

PETITION FOR EXTENSION OF TIME

Sir:

Applicants request a one (1) month extension of time to respond to the Office Action dated March 20, 2006, in the above application from June 20, 2006 to July 20, 2006.

Please charge the fee of \$120.00 for the extension of time to Deposit Account No. 16-2500 of the undersigned.

Respectfully submitted,

PROSKAUER ROSE LLP

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Mark A. Catan Reg. No. 38,720

Date: June 26, 2006

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06/29/2006 SSESHE1 00000069 162500 10774127 120.00

Complete if Known Application Serial Number 10/774,127 FEE TRANSMITTAL Filing Date February 6, 2004 Jeffrey H. BURBANK, et al. First Named Inventor FY 2005 Group Art Unit 3761 Patricia Bianco **Examiner Name** Attorney Docket No. 53951-122 FEE CALCULATION (continued) METHOD OF PAYMENT 4. ADDITIONAL FEES Large Small ☐ Check ☐ Money Order ☐ Other Entity Entity Fee The Commissioner is hereby authorized to credit or charge any fee Fee Description Ø Fee(\$) Fee (\$) indicated below for this submission to Deposit Account No. 16-2500 Paid Surcharge - late filing fee or oath 130 65 Required Fees (copy of this sheet enclosed). Surcharge - late provisional filing fee or Additional fee required under 37 CFR 1.16 and 50 25 cover sheet 1.17. 130 130 Non-English specification Ø Overpayment Credit. Request for ex parte re-examination Applicant claims small entity status. 2,520 2,520 Extension for reply within 1st mo. 120 FEE CALCULATION 120 60 Extension for reply within 2nd mo. 1. BASIC FILING, SEARCH, AND EXAMINATION FEES 450 225 Extension for reply within 3rd mo. Examination Fee Paid 1,020 510 Search Application Filing Type Extension for reply within 4th mo. 795 Utility 300 500 200 1.590 Extension for reply within 5th mo. 1.080 2,160 Design 200 100 130 500 250 Notice of Appeal 160 200 300 Plant Filing a brief in support of an appeal 500 600 500 250 300 Reissue 500 Request for oral hearing 200 0 1,000 **Provisional** 0 Petitions to the Director 400 0 Small Entity Discount 180 180 Submission of IDS 1. TOTAL 2. EXCESS CLAIM FEES Small Entity 790 395 Filing a submission after final Fee (\$) rejection (37 CFR 1.129(a)) Each claim over 20 or, for Reissues, each claim 50 25 over 20 and more than in the original patent. 395 For each additional invention to be 790 examined (37 CFR 1.129(b)) Each independent claim over 3 or, for Reissues, 200 100 each independent claim more than in the original Certificate of Correction for applicant's 100 100 patent. Submission of Terminal Disclaimer **Total Claims** Fee Paid (\$) 110 55 Extra Claims - 20 or HP= X \$50 = HP = highest number of total claim paid for, if great than 20 Other fee (Specify) Request for Continued Examination (RCE) Inden. Claims Extra Claims Fee Paid (\$) Other fee (Specify) - 3 or HP= 4. TOTAL: 120.00 HP = highest number of total claim paid for, if great than 3 Multiple Dependent Fee(\$) Small Entity fee (\$) Fee Paid (\$) 180 Claims TOTAL AMOUNT SUBMITTED 2. TOTAL: 120.00 SIGNATURE BLOCK 3. APPLICATION SIZE FEE If the specification and drawing exceed 100 sheets of paper, the application Respectfully submitted, size fee due is \$250 (\$125 for small entity) for each additional sheets or fraction there of. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Extra Additional 50 or fraction Fee (\$) Date: June 26, 2006 Paid thereof Sheets Sheets Reg. No..38,720 Mark A. Catan round up to a -100 = /50 = Attorney for the Applicants whole number Proskauer Rose LLP Tel. No.: (212)969-3000 3. TOTAL: Fax No.: (212)969-2900 1585 Broadway CORRESPONDENCE ADDRESS New York, NY 10036 Direct all correspondence to: Patent Department Proskauer Rose LLP 1585 Broadway New York, NY 10036 Tel. No.: (212)969-3000 Fax No.: (212)969-2900